Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA	=	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 eck if this is an nended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Nicholas First name Philip		First name
	license or passport).	Middle name	_	Middle name
	Bring your picture identification to your	Lugo		
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9787		

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapter 7						
		☐ Chap						
		☐ Chap	oter 12					
		☐ Chap	oter 13					
8.	How you will pay the fee	— ab	out how y	ou may pay. Typi attorney is subm	ntire fee when I file my petition. Please check with the clerk's office in your local court for more details may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money torney is submitting your payment on your behalf, your attorney may pay with a credit card or check with			
		□ Ir	need to pa	y the fee in insta	allments. If you choose this opt	ion, sign and attach the Application for Indiv	iduals to Pay	
		□ Ir	equest that is not red	at my fee be wai juired to, waive y	our fee, and may do so only if y	on only if you are filing for Chapter 7. By law our income is less than 150% of the official	poverty line that	
						in installments). If you choose this option, you choose this option, you call Form 103B) and file it with your petition		
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	residence:	☐ Yes.	Has y	our landlord obtai	ined an eviction judgment again	st you?		
				No. Go to line 1	2.			
				Ves Fill out Init	tial Statement Δhout an Eviction	Judgment Against You (Form 101A) and file	a it as nart of	

Case number (if known)

Debtor 1 Nicholas Philip Lugo

Deb	otor 1 Nicholas Philip Lu	ıgo			Case number (if known)	
Par	Report About Any Bu	ısinesses	You Owi	n as a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of busi	ness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numi	Number, Street, City, State & ZIP Code		
	it to this petition.		Chec	k the appropriate bo:	to describe your business:	
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
Par	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	proceed you are of cash-flow § 1116(1) ■ No. □ No. □ Yes. □ Yes.	under Suchoosing v statemen (B). I am Code I am I do r I am	subchapter V so that it is to proceed under Subent, and federal incommot filling under Chapter 1 e. filling under Chapter 1 e.	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11. If the procedure in 11 U.S.C. ter 11. If the procedure in 11 U.S.C. the p	
14.			, mazara	<u> </u>	Troporty That troods illinoutate / tronder.	
	property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
					Number, Street, City, State & Zip Code	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Nicholas Philip Lu	ıgo		Case numbe	(if known)			
Par	6: Answer These Quest	ons for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer debts are definantly, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
	16b.		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ov	ve that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	■ Yes.		o you estimate that after any exempt prop ilable to distribute to unsecured creditors?	erty is excluded and administrative expenses?			
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	1 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000			
19.	How much do you ■ \$0 -		50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion			
20.	How much do you estimate your liabilities	= \$0 - \$5	50,000	\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	7: Sign Below							
For	you	I have exa	amined this petition, and I decl	are under penalty of perjury that the inform	nation provided is true and correct.			
				I am aware that I may proceed, if eligible, lief available under each chapter, and I ch				
				ot pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this			
		I request	relief in accordance with the ch	napter of title 11, United States Code, spec	cified in this petition.			
		bankrupto and 3571	y case can result in fines up to	concealing property, or obtaining money o \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Nicholas	s Philip Lugo of Debtor 1	Signature of Debto	r 2			
		Executed		Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

Debtor 1 Nicholas Philip Lu	ugo	Cas	se number (if known)
	I the ottornou for the debtor(s) named in this noti	tion declare that I have	informed the debter(e) about distibility to present
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United S	States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
f you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, ce schedules filed with the petition is incorrect.	rtify that I have no knov	vledge after an inquiry that the information in the
	/s/ William G. Berggren	Date	September 21, 2023
	Signature of Attorney for Debtor		MM / DD / YYYY
	William G. Berggren 18675		
	Berggren Law Offices, PLLC		
	Firm name		
	P.O. Box 18306 Raleigh, NC 27619 Number, Street, City, State & ZIP Code		

Email address

Contact phone (919) 875-8773

18675 NC Bar number & State wgb@raleighbankruptcy.com

Fill	in this information to identify your case:		
Del	otor 1 Nicholas Philip Lugo First Name Middle Name Last Name		
Del	First Name Middle Name Last Name otor 2		
(Spo	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA		
	se number	_	ck if this is an nded filing
Of	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info you	as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend roriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,000.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	18,000.00
Par	t 2: Summarize Your Liabilities		
		Your	iabilities
		Amou	nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,080.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,180.64
	Your total liabilities	\$	46,260.64
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,800.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,800.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	I, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,111.91

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,065.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,065.00

Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Nicholas Philip L	-			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF NORTH	CAROLINA		
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Prop	erty			12/15
think it fits best. I	Be as complete and accura- re space is needed, attach	e items. List an asset only once. If ar te as possible. If two married people a separate sheet to this form. On the	are filing together, both ar	e equally responsible for sup	plying correct
Part 1: Describe	Each Residence, Building	, Land, or Other Real Estate You Owi	or Have an Interest In		
1. Do you own or	have any legal or equitable	interest in any residence, building, l	and, or similar property?		
■ No. Go to Pa	rt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes					
3.1 Make:	Triumph	Who has an interest in the	property? Check one	Do not deduct secured clai the amount of any secured	•
Model:	Speed Triple 1200RS	Debtor 1 only		Creditors Who Have Claim	
Year:	2022	Debtor 2 only Debtor 1 and Debtor 2 or		Current value of the	Current value of the
Other infor		Debtor 1 and Debtor 2 or ☐ At least one of the debtor		entire property?	portion you own?
JD Powe used.	ers Average Retail Va	Check if this is commu (see instructions)	nity property	\$15,680.00	\$15,680.00
Examples: Boa No Yes Add the doll pages you h	ats, trailers, motors, perso ar value of the portion y ave attached for Part 2.	TVs and other recreational vehiconal watercraft, fishing vessels, snow own for all of your entries from Write that number here	wmobiles, motorcycle ac	y entries for	\$15,680.00 urrent value of the ortion you own?
				Do	o not deduct secu aims or exemption

Debtor 1	Nicholas Philip Lugo	Case number (if known)	
6. House l	hold goods and furnishings		
Examp	oles: Major appliances, furniture, linens, china, kitchenware		
☐ No			
Yes	. Describe		
	Dada an Familia		\$300.00
	Bedroom Furniture		\$300.00
7. Electro			ala atau da da da da a
Examp	oles: Televisions and radios; audio, video, stereo, and digital equipment including cell phones, cameras, media players, games	it; computers, printers, scanners; music collections	; electronic devices
☐ No			
Yes	. Describe		
	Television(s)		\$300.00
	Video Camera		\$300.00
	Tidoo Gainera		
	Computer and Accessories		\$300.00
	Cell Phone		\$600.00
	Gen i none		
Examp □ No	nent for sports and hobbies oles: Sports, photographic, exercise, and other hobby equipment; bicy musical instruments	cles, pool tables, golf clubs, skis; canoes and kayak	s; carpentry tools;
■ Yes	. Describe		
	Books		\$50.00
	Recreational Equipment		\$100.00
	Recreational Equipment		Ψ100.00
■ No □ Yes	nples: Pistols, rifles, shotguns, ammunition, and related equipment . Describe		
☐ No	es nples: Everyday clothes, furs, leather coats, designer wear, shoes, acc Describe	essories	
	Clothing & Personal		\$300.00
			, , , , , , , , , , , , , , , , , , ,
12. Jewel <i>Exam</i> □ No	Iry nples: Everyday jewelry, costume jewelry, engagement rings, wedding	rings, heirloom jewelry, watches, gems, gold, silver	r

Yes. Describe.....

De	ebtor 1 Nicholas Ph	nilip Lugo	Case number (if know	n)
		Jewelry		\$50.00
	Non-farm animals Examples: Dogs, cats, No Yes. Describe	birds, horses		
	Any other personal ar ■ No □ Yes. Give specific in	•	t already list, including any health aids you did not list	
15		of all of your entries from Part number here	3, including any entries for pages you have attached	\$2,300.00
Pa	art 4: Describe Your Finar	ncial Assets		
		legal or equitable interest in an	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	have in your wallet, in your home	e, in a safe deposit box, and on hand when you file your pe	tition\$20.00
		savings, or other financial accoun If you have multiple accounts wit	ts; certificates of deposit; shares in credit unions, brokerag th the same institution, list each. Institution name:	e houses, and other similar
		17.1.	Wells Fargo Checking	\$0.00
		17.2.	Wells Fargo Savings	\$0.00
		or publicly traded stocks , investment accounts with broke Institution or issuer nar	rage firms, money market accounts	
	joint venture	tock and interests in incorpora	ted and unincorporated businesses, including an inter	est in an LLC, partnership, and
	■ No □ Yes. Give specific in	formation about them Name of entity:	% of ownership:	
	Negotiable instruments	s include personal checks, cashie nents are those you cannot transf	ble and non-negotiable instruments rs' checks, promissory notes, and money orders. rer to someone by signing or delivering them.	

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

De	ebtor 1	Nicholas P	hilip Lugo	Case num	nber (if known)
		ment or pension ples: Interests in		thrift savings accounts, or other pension or	profit-sharing plans
		List each accor	unt separately. Type of account:	Institution name:	
	Your s Examp	share of all unus		rou may continue service or use from a computilities (electric, gas, water), telecommunications	
	■ No □ Yes.			Institution name or individual:	
23.	Annuit ■ No	ties (A contract	for a periodic payment of money to y	ou, either for life or for a number of years)	
	☐ Yes		Issuer name and description.		
24.	Interest 26 U.S.	ts in an educa C. §§ 530(b)(1)	tion IRA, in an account in a qualific , 529A(b), and 529(b)(1).	d ABLE program, or under a qualified sta	ite tuition program.
	□ Yes		Institution name and description. Sep	arately file the records of any interests.11 U.	S.C. § 521(c):
	No		future interests in property (other to state of the state	han anything listed in line 1), and rights o	or powers exercisable for your benefit
			trademarks, trade secrets, and oth	er intellectual property	
	■ No		omain names, websites, proceeds from	m royalties and licensing agreements	
	Licens	es, franchises	s, and other general intangibles	e association holdings, liquor licenses, profe	essional licenses
	☐ Yes.	Give specific i	nformation about them		
Mo	oney or	property owed	I to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	funds owed to	you		
	■ No □ Yes.	Give specific ir	nformation about them, including whe	ther you already filed the returns and the tax	years
29.		r support ples: Past due d	or lump sum alimony, spousal suppo	t, child support, maintenance, divorce settler	nent, property settlement
	☐ Yes.	Give specific in	nformation		
30.		<i>ples:</i> Unpaid wa	eone owes you ages, disability insurance payments, unpaid loans you made to someone of	lisability benefits, sick pay, vacation pay, wo	orkers' compensation, Social Security
	■ No □ Yes.	Give specific i	nformation		
		sts in insuranc ples: Health, dis		gs account (HSA); credit, homeowner's, or re	enter's insurance
	■ Yes.	Name the insu	rance company of each policy and lis Company name:	t its value. Beneficiary:	Surrender or refund value:

Debtor 1	Nicholas Philip Lugo	Case number (if known)	
	Auto In	surance	\$0.00
If you some ■ No		you from someone who has died ust, expect proceeds from a life insurance policy, or are currently entitled to rec	eive property because
		er or not you have filed a lawsuit or made a demand for payment sputes, insurance claims, or rights to sue	
■ Yes	Describe each claim		
		Debtor has potential claim against former employer, Fit4Life; for violation of employment terms and unfair treatment. Debtor has filed a complaint with the North Carolina Board of Labor.	Unknowr
■ No	contingent and unliquidated of Describe each claim	claims of every nature, including counterclaims of the debtor and rights t	o set off claims
	nancial assets you did not alr	eady list	
■ No	nanolal accord you all not all		
☐ Yes.	Give specific information		
		entries from Part 4, including any entries for pages you have attached	\$20.00
Part 5: De	escribe Any Business-Related Pro	perty You Own or Have an Interest In. List any real estate in Part 1.	
37. Do yo u	own or have any legal or equitabl	e interest in any business-related property?	
■ No. G	o to Part 6.		
☐ Yes.	Go to line 38.		
	escribe Any Farm- and Commercia you own or have an interest in farmla	al Fishing-Related Property You Own or Have an Interest In. and, list it in Part 1.	
	, , ,	uitable interest in any farm- or commercial fishing-related property?	
_	. Go to Part 7. s. Go to line 47.		
□ re:	s. Go to line 47.		
Part 7:	Describe All Property You Own	or Have an Interest in That You Did Not List Above	
Exam	u have other property of any loples: Season tickets, country clo		
■ No □ Yes.	Give specific information		
54. Add	the dollar value of all of your	entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Deb	tor 1 Nicholas Philip Lugo			Case number (if known)	
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$15,680.00		
57.	Part 3: Total personal and household items, line 15		\$2,300.00		
58.	Part 4: Total financial assets, line 36		\$20.00		
59.	Part 5: Total business-related property, line 45	_	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$18,000.00	Copy personal property total	\$18,000.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$18,000.00

Fil	I in this inform	ation to identify your	case:						
De	btor 1	Nicholas Philip L	ugo						
		First Name		ddle Name	Last Name				
1 -	ebtor 2 ouse if, filing)	First Name	Mic	ddle Name	Last Name				
Un	ited States Ban	kruptcy Court for the:	EASTE	RN DISTRICT OF NO	ORTH CAROLINA				
Ca	se number								
	nown)							Check if this is an amended filing	
\sim	Kisial Far	1000					•	J	
	fficial For								
S	chedule	e C: The Pro	oper	ty You Cla	im as Exe	mpt		4	/22
the nee	property you lis	d accurate as possible. sted on Schedule A/B: FI attach to this page as own).	Property (0	Official Form 106A/B)	as your source, list the	e property that you	claim as exe	empt. If more space is	3
spe any fun exe	ecific dollar am applicable sta ds—may be ur emption to a pa	property you claim as pount as exempt. Alter atutory limit. Some exemption and the continuities in dollar amount attours amount.	rnatively, emptions unt. How	you may claim the f —such as those for ever, if you claim an	ull fair market value of health aids, rights to exemption of 100% of	of the property bei o receive certain be of fair market value	ng exempte enefits, and e under a la	ed up to the amount I tax-exempt retirem Iw that limits the	of ent
Pa	rt 1: Identify	the Property You Cla	aim as Ex	empt					
1.	Which set of	exemptions are you c	laiming?	Check one only, ever	n if your spouse is filing	g with you.			
	☐ You are cla	iming state and federal	nonbankı	ruptcy exemptions. 1	11 U.S.C. § 522(b)(3)				
	■ You are cla	iming federal exemption	ns. 11 U.	.S.C. § 522(b)(2)					
2.	For any prope	erty you list on Sched	<i>lule A/B</i> tl	nat you claim as exe	empt, fill in the inform	nation below.			
	•	on of the property and line hat lists this property		Current value of the portion you own	Amount of the exemp	otion you claim	Specific lav	ws that allow exemptio	n
				0 11 1 1	0, , , ,				

Schedule A/B that lists this property	portion you own	7 and and 61 and 63	
	Copy the value from Schedule A/B	Check only one box for each exemption.	
2022 Triumph Speed Triple 1200RS 12.000 miles	\$15,680.00	\$4,450.00	11 U.S.C. § 522(d)(2)
JD Powers Average Retail Value used. Line from Schedule A/B: 3.1		□ 100% of fair market value, up to any applicable statutory limit	
Bedroom Furniture Line from Schedule A/B: 6.1	\$300.00	\$300.00	11 U.S.C. § 522(d)(3)
Elife Holli Schedule A.B. 4.1		☐ 100% of fair market value, up to any applicable statutory limit	
Television(s) Line from Schedule A/B: 7.1	\$300.00	\$300.00	11 U.S.C. § 522(d)(3)
Enterior deficación A.D. 7.1		☐ 100% of fair market value, up to any applicable statutory limit	
Video Camera Line from Schedule A/B: 7.2	\$300.00	\$300.00	11 U.S.C. § 522(d)(3)
Line IIIIII Schedule AVB. 1-2		☐ 100% of fair market value, up to any applicable statutory limit	
Computer and Accessories Line from Schedule A/B: 7.3	\$300.00	\$300.00	11 U.S.C. § 522(d)(3)
Line from <i>Scriedule PVD</i> . 1.3		100% of fair market value, up to any applicable statutory limit	

Del	otor 1 Nicholas Philip Lugo			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Cell Phone Line from Schedule A/B: 7.4	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	Books Line from Schedule A/B: 9.1	\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	Recreational Equipment Line from Schedule A/B: 9.2	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	Clothing & Personal Line from Schedule A/B: 11.1	\$300.00		\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	Jewelry Line from Schedule A/B: 12.1	\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	Debtor has potential claim against former employer, Fit4Life; for violation of employment terms and unfair treatment. Debtor has filed a complaint with the North Carolina Board of Labor. Line from Schedule A/B: 33.1	Unknown		\$15,405.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ises fi	·	,

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CARLINA RALEIGH DIVISION

In re:	CASE NO.
Nicolas Philip Lugo	CHAPTER 7
Debtor.	
SCHEDULE C - 2 - PROPE	RTY CLAIMED AS EXEMPT
I, <u>Nicolas Philip Lugo</u> , claim the f and the Federal bankruptcy law or the laws of a State other	following property as exempt pursuant to 11 U.S.C. § 522 er than North Carolina, and nonbankruptcy Federal law:
(Attach additional sheets if necessary).	

 \Box Check if debtor claims a homestead exemption that exceeds \$125,000.

Description of Property	Specify Law Providing Each Exemption	<u>Value of</u> <u>Claimed</u> <u>Exemption</u>	Current Market Value of Property Without Deducting Exemption
See Attached Schedule C which is incorporated by this reference.			

3. 11 U.S.C. Sections 522 (d)(3), (d)(4), and (d)(5) **PERSONAL OR HOUSEHOLD GOODS, JEWELRY (and Wildcard if Applicable)**

Description of Property	Market Value	Lien Holder	Amt. Lien	Net Value	Claimed as Exempt
Clothing & personal	300			300	300
Kitchen appliances					
Stove					
Refrigerator					
Freezer					
Washing Machine					
Dryer					

China			
Silver			
Jewelry (11 U.S.C. Sec. 522(d)(4)	50	50	50
Living Room Furniture			
Den Furniture			
Bedroom Furniture	300	300	300
Dining Room Furniture			
Lawn Furniture			
Television(s)	300	300	300
() Stereo () Radio			
() VCR/DVD (x) Video Camera	300	300	300
Other Audio Equipment			
Computer & Accessories	300	300	300
Musical Instruments			
() Piano () Organ			
Air Conditioner			
Paintings/Art			
Books	50	50	50
Other Collections (CD's, Tapes, Etc.)			
Lawn Mower			
Yard Tools			
Power Tools			
Other Tools			
Crops			
Recreational Equipment	100	100	100
Firearms (used for household protection)			
Other Household Goods, Supplies & Furnishings			
Other Personal Items & Possessions			
Other Miscellaneous Items, Specify: Cell Phone	600	600	600

VALUE CLAIMED AS EXEMPT:				2,300.00	

I declare that the following are the dates and addresses of my domicile during the 730 days preceding the date of the filing of the bankruptcy petition:

<u>Prior Addresses / Dates</u>
See Response To Question 2, of Statement of Financial Affairs

I declare that to the extent that any exemption I have claimed appears on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-2 - PROPERTY CLAIMED AS EXEMPT

I, Nicolas Philip Lugo	, d eclare under
penalty of perjury that I have read the foregoing Sche	edule -C-2 - Property Claimed as Exempt, consisting of
sheets, and that they are true and correct to the b	best of my knowledge, information and belief.
Executed on:	/s/Nicolas Philip Lugo Nicolas Philip Lugo, Debtor

Fill in this informa	tion to identify vo	ur case:				
Debtor 1						
Debtor i	Nicholas Philip First Name		t Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Las	t Name			
United States Bank	ruptcy Court for the	e: EASTERN DISTRICT OF NORTH C	CAROLINA			
	., .,		-			
Case number (if known)						if this is an
Official Form						
Schedule D	: Creditors	s Who Have Claims Se	cured	by Propert	у	12/15
		If two married people are filing together, be out, number the entries, and attach it to thi				
1. Do any creditors ha	ive claims secured b	by your property?				
☐ No. Check th	nis box and submit	this form to the court with your other sche	edules. You	u have nothing else t	o report on this form.	
Yes. Fill in a	II of the information	below.				
Part 1: List All S	Secured Claims					
for each claim. If more	e than one creditor ha	more than one secured claim, list the creditor is a particular claim, list the other creditors in Pitical order according to the creditor's name.		Column A Amount of claim Do not deduct the	Value of collateral that supports this	Column C Unsecured portion
2.1 Freedom Ro	oad Financial	Describe the property that secures the cl	laim:	value of collateral. \$14,080.00	claim \$15,680.00	If any \$0.00
Creditor's Name		2022 Triumph Speed Triple 1200	DRS			
		12,000 miles				
Attn: Bankr		JD Powers Average Retail Value used.	*			
10509 Profe Suite 100	essional Cir,	As of the date you file, the claim is: Check	all that			
Reno, NV 89	9521	apply. Contingent				
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg car loan)	age or secu	red		
Debtor 2 only		_				
☐ Debtor 1 and Debt	,	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
Check if this clair community debt	n relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
	Opened 12/21 Last					
Data daht was inquir	Active	Last 4 digits of account number	3933			
Date debt was incurr	ed <u>6/26/23</u>	Last 4 digits of account number				
Add the dollar valu	e of your entries in (Column A on this page. Write that number h	ere:	\$14,08	30.00	
If this is the last pa Write that number		the dollar value totals from all pages.		\$14,08	30.00	
Part 2: List Other	rs to Be Notified for	or a Debt That You Already Listed				
trying to collect from	you for a debt you any of the debts that	be notified about your bankruptcy for a deb owe to someone else, list the creditor in Par at you listed in Part 1, list the additional cred his page.	rt 1, and the	n list the collection a	gency here. Similarly, if	you have more
[]						
Name, Numb	er, Street, City, State Road Financial	α Zip Code	On which	line in Part 1 did you e	nter the creditor? 2.1	
PO Box 4			Last 4 dig	gits of account number _	_	
Oak Brook	k, IL 60522-4597	•				

Debtor 1	^{r 1} Nicholas Philip Lugo			Case number (if known)	
	First Name	Middle Name	Last Name		

Fill in this infor	mation to identify your cas	e:					
Debtor 1	Nicholas Philip Lugo	<u> </u>					
2 00101 1	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the: E	ASTERN DISTRICT OF	NORTH CAROLINA				
Case number							
(if known)						Check if this i	is an
						amended filin	ıg
Official For	m 106E/E						
		a Haya Hasası	rad Claima			40	14 E
	E/F: Creditors Who						2/15
Schedule D: Credi	utory Contracts and Unexpired itors Who Have Claims Secured ntinuation Page to this page. It Imber (if known).	d by Property. If more spa	ce is needed, copy the l	Part you need, fill it ou	t, number the	entries in the bo	oxes on the
Part 1: List A	All of Your PRIORITY Unsec	cured Claims					
	tors have priority unsecured cl	aims against you?					
☐ No. Go to	Part 2.						
Yes.							
identify what t possible, list the	ur priority unsecured claims. If ype of claim it is. If a claim has be he claims in alphabetical order act than one creditor holds a particu	oth priority and nonpriority a ccording to the creditor's na	amounts, list that claim he me. If you have more that	re and show both priority	y and nonpriori	ty amounts. As m	nuch as
(For an explar	nation of each type of claim, see	the instructions for this form	in the instruction booklet				
				Total claim	Priority amount	Nonp amou	riority Int
2.1 Interna	al Revenue Service	Last 4 digits of a	account number	\$0.0		\$0.00	\$0.00
•	reditor's Name				<u> </u>		*
	lized Insolvency	When was the de	ebt incurred?				
Operat PO Bo							
Philade	elphia, PA 19101-7346						
	Street City State Zip Code	As of the date yo	ou file, the claim is: Che	ck all that apply			
Who incurred the debt? Check one.							
■ Debtor 1 only □ Unliquidated							
☐ Debtor 2 only ☐ Disputed							
Debtor 1	and Debtor 2 only	Type of PRIORIT	TY unsecured claim:				
☐ At least o	one of the debtors and another	☐ Domestic sup	port obligations				
☐ Check if	this claim is for a community	debt Taxes and cer	rtain other debts you owe	the government			
	subject to offset?		ath or personal injury while				
■ No		Other. Specify					
☐ Yes		, ,	Notice Purposes	s Only			

Dept	or 1 Nicholas Philip Lugo	Case number (if known)		
2.2	N.C. Dept of Revenue	Last 4 digits of account number \$0.00	\$0.00	\$0.00
	Priority Creditor's Name Office Service Div. Bankruptcy	When was the debt incurred?		
	Unit			
	PO Box 1168 Raleigh, NC 27602-1168			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	\square At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	\square Claims for death or personal injury while you were intoxicated		
	■ No	Other. Specify		
	Yes	Notice Purposes Only		
	2: List All of Your NONPRIORITY Unsecutor any creditors have nonpriority unsecured claim. No. You have nothing to report in this part. Submit	ns against you?		
3. C	o any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other	ns against you?	cluded in Part 1	I. If more
3. C	o any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim.	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in	cluded in Part 1	I. If more
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claan one creditor holds a particular claim, list the other part 2.	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. iist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other lart 2. Cape Fear Valley Health Nonpriority Creditor's Name	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number	ncluded in Part 1 e Continuation I	I. If more
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other lart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more th laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other cart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other lart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 1942 When was the debt incurred? As of the date you file, the claim is: Check all that apply	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other eart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 1942 When was the debt incurred?	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. iist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other lart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number Men was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other cart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	this form to the court with your other schedules. Palphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 1942 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated	ncluded in Part 1 e Continuation I	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other lart 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 1942	Total claim	I. If more Page of
3. C	Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 1942 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	Total claim	I. If more Page of
3. C	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. Cape Fear Valley Health Nonpriority Creditor's Name PO Box 788 Fayetteville, NC 28302-0788 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 1942	Total claim	I. If more Page of

Debtor 1 Nicholas Philip Lugo				
4.2	Citibank/Best Buy	Last 4 digits of account number	3447	\$2,699.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 11/15 Last 08/23	Active
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce t	hat you did not
	No	Debts to pension or profit-sharin	g plans, and other similar deb	ots
	Yes	Other. Specify Charge Acc	count	
4.3	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	5141	\$4,888.00
	Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 01/20 Last 07/23	Active
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa	· ·	•
	■ No	Debts to pension or profit-sharin	ots	
	Yes	Other. Specify Credit Card		
4.4	Elaine Marie Lugo Nonpriority Creditor's Name	Last 4 digits of account number		\$1,874.69
	206 Saxony PI. Apt. K Fayetteville, NC 28304	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa	· ·	•
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar deb	ots
	Yes	Other. Specify Loan		

Debtor 1 Nicholas Philip Lugo		Case number (if known)					
4.5	Fit4Life Health Clubs Nonpriority Creditor's Name	Last 4 digits of account number		Unknown			
	2820 Hope Mills Rd. Fayetteville, NC 28306	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
4.6	Hunter Warfield	Last 4 digits of account number		\$6,000.00			
	Nonpriority Creditor's Name c/o Camden Apartments 4620 Woodland Corp Blvd	When was the debt incurred?					
	Tampa, FL 33614 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Canceled L	ease				
4.7	MOHELA	Last 4 digits of account number	0207	\$2,065.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Drive	When was the debt incurred?	Opened 02/18 Last Active 05/23				
	Chesterfield, MO 63005 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
		Educationa	ıl				

4.8	Pathgroup	Last 4 digits of account number		\$41.19
	Nonpriority Creditor's Name			
	PO Box 740858	When was the debt incurred?		
	Cincinnati, OH 45274-0858 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	710 of the date you me, the stalling	e. Chook all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	o plans, and other similar debts	
	Yes	■ Other. Specify Medical Bil	<u> </u>	
4.9	Peak Payment Solutions	Last 4 digits of account number	6844	\$134.97
	Nonpriority Creditor's Name PO Box 1040	When was the debt incurred?		
	Kaysville, UT 84037 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	, , ,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Default pay	rment	
4.1				
0	Wells Fargo Bank NA	Last 4 digits of account number	1345	\$11,862.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1 Home Campus Mac X2303-01a 3rd Floor	When was the debt incurred?	Opened 06/15 Last Active 06/23	
	Des Moines, IA 50328 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

Case number (if known)

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Nicholas Philip Lugo

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Nicholas Philip Lugo		Case number (if known)		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?		
Discover	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 30939 Salt Lake City, UT 84130		■ Part 2: Creditors with Nonpriority Unsecured Claims		
, , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?		
Fit 4 Life Health Clubs	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 80233 Raleigh, NC 27623		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Kaleigii, NC 27023	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
T 1	6f.	Student loans	6f.	\$ 2,065.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 30,115.64
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,180.64

Fill in this infor	Fill in this information to identify your case:				
Debtor 1	Nicholas Philip L	ugo			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NORTH CAROLINA		
Case number				☐ Check if this is an	
(,				amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
					_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	•				

Fill in this	information to identify your	case:			
Debtor 1	Nicholas Philip L	ugo			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT O	OF NORTH CAROLINA		
Case numl	ber				☐ Check if this is an amended filing
	l Form 106H Iule H: Your Cod	ebtors			12/15
people are fill it out, a your name	filing together, both are equ nd number the entries in the and case number (if known	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct information the Additional Page to h.	on. If more space is n this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do :	you have any codebtors? (If	you are filing a joint case,	do not list either spouse a	as a codebtor.	
■ No □ Yes	3				
Arizon _	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.				y states and territories include
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form out Co	2 again as a codebtor only	f that person is a guarar	ntor or cosigner. Make s	ure you have listed tl G). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
1	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
3.1	Name			☐ Schedule D, lin☐ Schedule E/F, I☐ Schedule G, lin☐ Schedule G, lin☐ Schedule G	ine
	Number Street City	State	ZIP Code	-	
3.2	Name			☐ Schedule D, lin☐ Schedule E/F, I☐ Schedule G, lin☐	ine
	Number Street City	State	ZIP Code	-	

Fill	in this information to identify your ca	ase:				1			
	otor 1 Nicholas Ph								
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF NORTH CAROL	.INA					
	se number 		-			Check if this is: An amende A supplement 13 income	ed filing ent showin	ng postpetition ollowing date:	chapter
0	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing w	ith you, do not inclu	ıde infori	mati	on about your spo	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed■ Not employed			☐ Emple	•		
	employers.	Occupation	Unemployed						
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.		you have nothing to r	eport for	any	line, write \$0 in the	space. In	clude your nor	n-filing
-	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	on for all e	emplo	oyers for that perso	on on the li	ines below. If y	you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lir	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

					For	Debtor '	1			Debtor		
	Copy	y line 4 here	4.		\$		0.0	00	\$	n-filing s	spouse N/A	
		y line 4 nere			· –			_	*-			<u>-</u>
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$		0.0	00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	Э.	\$		0.0	00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$		0.0	00	\$_		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.0	00	\$		N/A	
	5e.	Insurance	56	Э.	\$		0.0	00	\$		N/A	
	5f.	Domestic support obligations	5f		\$		0.0	00	\$		N/A	
	5g.	Union dues	50	g.	\$		0.0	00	\$		N/A	_
	5h.	Other deductions. Specify:	5h	า.+	- \$		0.0	00	+ \$ _		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$_		0.0	0	\$		N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_		0.0	00	\$		N/A	<u>. </u>
8.	List a	all other income regularly received: Net income from rental property and from operating a business,										
	ou.	profession, or farm										
		Attach a statement for each property and business showing gross										
		receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	88		\$_		0.0		\$		N/A	_
	8b.	Interest and dividends	8t	٥.	\$_		0.0	00_	\$		N/A	<u>. </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	t									
		Include alimony, spousal support, child support, maintenance, divorce										
		settlement, and property settlement.	80		\$_		0.0		\$_		N/A	_
	8d.	Unemployment compensation	80		\$_		0.0	00_	\$_		N/A	_
	8e.	Social Security	86	€.	\$_		0.0	0	\$		N/A	<u>. </u>
	8f.	Other government assistance that you regularly receive										
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	Э									
		Specify:	8f		\$		0.0	00	\$		N/A	
	8g.	Pension or retirement income	8g	a.	\$		0.0	_	\$		N/A	_
	8h.	Other monthly income. Specify: Contributions from Family		ว า.+	· \$ ⁻	2,8					N/A	_
_				İ					_			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,8	00.0	00	\$_		N/	A
10	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$		2 200 0		\$		NI/A	= \$	2 900 00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	Ψ.		2,800.0	0 +	Ψ_		N/A	= \$_	2,800.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	ļ									
11.	Inclu	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your riends or relatives.	e J . r dep	en	dents	, your roo	mm	ates	s, and			
	Do no	ot include any amounts already included in lines 2-10 or amounts that are not cify:	avail	lab	le to p	pay exper	nses	list	ed in S		e J. +\$	0.00
40	A .1 .1	the amount in the last column of the 40 to the amount in the 40.	16. 5			and the second						
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certa								•		
	appli			101	111100	and reduc	.00 2	Juliu	,	12.	\$	2,800.00
											Combi month	ned ly income
13.	Do y □	ou expect an increase or decrease within the year after you file this form No.	1?									-
		Yes. Explain: Debtor expects to start working for Dominos Piz	za d	lel	iveri	na pizza	ns.	The	Com	npensa	tion is	\$5.00 per
	_	hour plus tips. Miles will be reimbursed at .35 p hourly rate is \$8.00 per hour.										

Official Form 106l Schedule I: Your Income page 2

Fill	n this information to identify your case:					
Deb	Nicholas Philip Lugo				if this is:	
	tor 2 buse, if filing)			_ A		ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: _EASTERN DIS	STRICT OF NORTH	CAROLINA	N	IM / DD / YYYY	
1	e number own)					
Of	ficial Form 106J					
Sc	chedule J: Your Expenses	5				12/15
info	as complete and accurate as possible. If two rmation. If more space is needed, attach and nber (if known). Answer every question.					
Pari	1: Describe Your Household Is this a joint case?					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate ho □ No □ Yes. Debtor 2 must file Official Form		for Separate House	<i>hold</i> of Debto	r 2.	
2.	Do you have dependents? ■ No	, ,	•			
	Do not list Debtor 1 and ☐ Yes. Fill ou	ut this information for dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes					☐ Yes
Est exp app	Estimate Your Ongoing Monthly Experimate your expenses as of your bankruptcy is enses as of a date after the bankruptcy is fillicable date. ude expenses paid for with non-cash govern	filing date unless yo led. If this is a suppl nment assistance if	emental <i>Schedule</i> you know	orm as a sup <i>J</i> , check the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the
	value of such assistance and have included icial Form 106l.)	it on <i>Schedule I: Ye</i>	our Income		Your expe	enses
4.	The rental or home ownership expenses for payments and any rent for the ground or lot.	or your residence. In	clude first mortgage	4. \$		1,300.00
	If not included in line 4:					
5.	 4a. Real estate taxes 4b. Property, homeowner's, or renter's insu 4c. Home maintenance, repair, and upkeep 4d. Homeowner's association or condomini Additional mortgage payments for your res 	expenses um dues	ne equity loans	4a. \$ 4b. \$ 4c. \$ 4d. \$ 5. \$		0.00 0.00 0.00 0.00 0.00

23. Calculate your monthly net income.

22c. Add line 22a and 22b. The result is your monthly expenses.

Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,800.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,800.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	0.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor will initially be using his mother's vehicle for delivery and will have expenses related to fuel for the vehicle. Once he gets on his feet his expenses will change once he can afford a replacement vehilce and his own place. His brother-in-law pays \$1,300 mortgage/rent, approximately \$500 for utilities and \$1,000 for food. The Debtor does not contribute to the household expenses at this time.

\$

2.800.00

Fill in this info	rmation to identify your	case:				
Debtor 1	Nicholas Philip L					
Dahtar 0	First Name	Middle Name	Las	t Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F NORTH (CAROLINA		
Case number						
(if known)						☐ Check if this is an amended filing
Official For	m 106Dec					
		n Individual	Debt	or's Sch	edules	12/15
Sig	gn Below					
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help	you fill out ban	kruptcy forms?	
■ No						
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and s	chedules filed v	with this declaration	on and
X /s/ Nic	cholas Philip Lugo		х			
Nicho	las Philip Lugo ure of Debtor 1			Signature of De	ebtor 2	
Date	September 21, 2023			Date		

Debtor 1	Nicholas Philip L	uao		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT OF NO	RTH CAROLINA	
Case number _ (if known)				☐ Check if this is an amended filing
Be as complete a	of Financial A	ole. If two married people are f	als Filing for Bankruptcy lling together, both are equally responsik form. On the top of any additional pages	
<u> </u>	n). Answer every ques Details About Your Mai	tion. rital Status and Where You Liv	ed Before	·
O.70 I		Status and Tillors I ou Elv		
1. What is you	r current marital status	s?		
1. What is you ☐ Married ☐ Not ma		s?		
☐ Married ■ Not ma 2. During the I	l rried ast 3 years, have you l	ived anywhere other than whe		
☐ Married Not ma 2. During the I	l rried ast 3 years, have you l	ived anywhere other than whe		Dates Debtor 2 lived there
☐ Married Not ma 2. During the I ☐ No ☐ Yes. Lis Debtor 1: 6555 W B	l rried ast 3 years, have you l	ived anywhere other than whe ved in the last 3 years. Do not inc	clude where you live now.	
☐ Married Not ma 2. During the I ☐ No ☐ Yes. Lis Debtor 1: 6555 W Br Plantation 501 SE 2n Apt. 1110	rried ast 3 years, have you I st all of the places you liv roward Blvd n, FL 33317	ved in the last 3 years. Do not inc Dates Debtor 1 lived there From-To:	Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1

Pa	art 2 Ex	xplain the Sources of You	ır İncome			
4.	Did you Fill in the	have any income from e	mployment or from operating our received from all jobs and a have income that you received.	all businesses, including part-	time activities.	ndar years?
	□ No					
	Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		ry 1 of current year until ı filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,826.05	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
		endar year: o December 31, 2022)	■ Wages, commissions, bonuses, tips	\$2,778.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
		ndar year before that: o December 31, 2021)	■ Wages, commissions, bonuses, tips	\$4,576.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
5.	 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotter winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. 					
			Debtor 1	Gross income from	Debtor 2	Grass income
			Sources of income Describe below.	each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	art 3: Li	st Certain Payments You	Made Before You Filed for	Bankruptcy		
6.	Are eith ☐ No.	Neither Debtor 1 nor D	's debts primarily consume Debtor 2 has primarily consu personal, family, or househol	ımer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.				and alimony. Also, do		

Case number (if known)

Del	otor 1 Ni	cholas Ph	ilip Lugo		Cas	se number (if known)		
	■ Yes.			ve primarily consumer de ed for bankruptcy, did you pa		al of \$600 or more?	?	
		■ No.	Go to line 7.					
		□ Yes		tor to whom you paid a tota domestic support obligatior ruptcy case.				
	Creditor	's Name an	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Insiders in of which y a busines alimony.	nclude your i you are an o s you opera	elatives; any general pa ficer, director, person ir	tcy, did you make a payme artners; relatives of any ger n control, or owner of 20% of 11 U.S.C. § 101. Include pa	neral partners; partnor more of their votin	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
		Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insider? Include pa ■ No □ Yes.	ayments on	debts guaranteed or con	tcy, did you make any pay signed by an insider. Dates of payment	ments or transfer Total amount paid	any property on a Amount you still owe		this payment
Par	t 4: Ide	ntify Legal	Actions, Repossessio	ns, and Foreclosures				
9.	List all sumodificati	ch matters, i	ncluding personal injury ntract disputes.	tcy, were you a party in ar y cases, small claims action				
	Case titl			Nature of the case	Court or agency	,	Status of th	e case
		s Philip L	ugo v. Fit4Life	Debtor has filed a complaint with the North Carolina Department of Labor against his prior employer Fit4Life.			Pending On appe Conclud	al
10.	Check all	that apply a Go to line 11	nd fill in the details belo	tcy, was any of your propo w.	erty repossessed,	foreclosed, garnis	shed, attached	d, seized, or levied?
		Name and	formation below. Address	Describe the Property		Date		Value of the
				Explain what happened	d	- 310		property

11.	Within 90 days before you filed for bank accounts or refuse to make a payment by		, did any creditor, including a bank or financial ins e you owed a debt?	stitution, set off any a	mounts from your
	No	Journe			
	☐ Yes. Fill in the details.				
	Creditor Name and Address	D	escribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o		was any of your property in the possession of an a her official?	assignee for the bene	fit of creditors, a
	■ No □ Yes				
Paı	tt 5: List Certain Gifts and Contribution	าร			
13.	Within 2 years before you filed for banks ■ No	uptcy,	did you give any gifts with a total value of more t	han \$600 per person?	•
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	l			
4.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	iptcy o	r since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfer	s			
16.	consulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Abacus Credit Counseling 17337 Ventura Boulevard Encino, CA 91316		Credit Counseling	Paid immediately prior to filing	\$25.00

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	value of any prop	perty	Date payment or transfer was made	Amount of payment
	Berggren Law Offices, PLLC P.O. Box 18306 Raleigh, NC 27619 wgb@raleighbankruptcy.com	Attorney Fees			Paid immediately prior to filing.	\$1,400.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	s or to make payments			or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid	Description and v	value of any pror	oertv	Date payment	Amount of
	Address	transferred	value of ally prop	Jerty	or transfer was made	payment
18.	Within 2 years before you filed for bankruptc	y, did you sell, trade, o	or otherwise tran	sfer any prop	erty to anyone, othe	er than property
	transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already No	siness or financial affa de as security (such as	airs? the granting of a s			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transfer			any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No ■ Yes. Fill in the details.		ny property to a s	self-settled tru	ust or similar device	of which you are a
	Name of trust	Description and v	Description and value of the property transferred Date Tra made			Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated to the cooperative of the cooperativ	other financial accou	nts; certificates	of deposit; sh		
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourant instrument	clo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed for	r bankruptcy, an	y safe deposi	t box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

22.	Hav	e you stored property in a storage unit or p	lace other than your home within 1	l yea	r before you filed for bankruptcy	?			
		No							
		Yes. Fill in the details.							
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City,	Des	scribe the contents	Do you still have it?			
			State and ZIP Code)						
Par	t 9:	Identify Property You Hold or Control for	Someone Else						
23.		you hold or control any property that some someone.	one else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust			
		No Yes. Fill in the details.							
		rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value			
Par	t 10:	Give Details About Environmental Inform	ation						
For	he p	ourpose of Part 10, the following definitions	apply:						
_									
	toxi	rironmental law means any federal, state, or c substances, wastes, or material into the a ulations controlling the cleanup of these su	air, land, soil, surface water, ground	_	•				
		means any location, facility, or property as wn, operate, or utilize it, including disposal	•	law,	whether you now own, operate, o	or utilize it or used			
	Haz	ardous material means anything an enviror ardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s was	ste, hazardous substance, toxic s	substance,			
Rep	ort a	II notices, releases, and proceedings that y	ou know about, regardless of when	n the	v occurred.				
-									
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liable	und	ler or in violation of an environme	ental law?			
		■ No							
	Ц	Yes. Fill in the details.	0		Foods and the Market	Data af matter			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of any	release of hazardous material?						
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	e you been a party in any judicial or admini	strative proceeding under any envi	ironr	nental law? Include settlements a	and orders.			
	_								
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name	Nat	ture of the case	Status of the case			
			Address (Number, Street, City, State and ZIP Code)						
Par	11:	Give Details About Your Business or Cor	nnections to Any Business						
27.	With	nin 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to any	business?			
		☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	, eith	er full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								

	☐ A partner in a partnership				
	☐ An officer, director, or managing executive of a corporation				
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation			
	■ No. None of the above applies. Go to	Part 12.			
	☐ Yes. Check all that apply above and fi	Il in the details below for each business.			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.		
		rame of accountant of bookscoper	Dates business existed		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your b institutions, creditors, or other parties.		anyone about your business? Include all financial			
	■ No				
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

Debto	Nicholas Philip Lugo	Case number (if known)
Part 1	2: Sign Below	
are tru with a		Affairs and any attachments, and I declare under penalty of perjury that the answers atement, concealing property, or obtaining money or property by fraud in connection 0, or imprisonment for up to 20 years, or both.
/s/ Ni	cholas Philip Lugo	
	plas Philip Lugo ture of Debtor 1	Signature of Debtor 2
Date	September 21, 2023	Date
Did yo	u attach additional pages to Your Statement of Fi	nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did yo	u pay or agree to pay someone who is not an atto	orney to help you fill out bankruptcy forms?
☐ Yes	. Name of Person Attach the Bankruptcy Pet	tition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this informa	ation to identify your o	case:				
Debtor 1	Nicholas Philip Lu					
Dobtor 1	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Bank	kruptcy Court for the:	EASTERN DISTR	RICT OF NORT	'H CAROLINA		
Case number						
(if known)					_	ck if this is an inded filing
Official For	m 108					
Statemen	t of Intentio	n for Indiv	iduals	Filing Under Chap	ter 7	12/15
_	idual filing under chap		I out this form	ı if:		
_	claims secured by you					
You must file this	er is earlier, unless th	ithin 30 days after	you file your l	bankruptcy petition or by the date se. You must also send copies to		
	ple are filing together date the form.	in a joint case, bo	th are equally	responsible for supplying correct	information. Both	ı debtors must
	nd accurate as possib ur name and case nun		s needed, atta	ch a separate sheet to this form. O	n the top of any a	dditional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims				
For any creditor information below		rt 1 of Schedule D	: Creditors W	ho Have Claims Secured by Prope	rty (Official Form	106D), fill in the
	litor and the property th	nat is collateral	What do yo	u intend to do with the property th		laim the property
Creditor's Fre	eedom Road Financ	ial	■ Surrende	er the property.	□No	
name:				ne property and redeem it.		
Description of	2022 Triumph Spee	ed Triple		e property and enter into a nation Agreement.	■ Yes	
property	1200RS 12,000 mile	es		e property and [explain]:		
securing debt:	JD Powers Averagused.	e Retail Value				
Part 2: List You	ır Unexpired Personal	Property Leases				
For any unexpired in the information	personal property lea below. Do not list rea	ase that you listed I estate leases. Un	expired lease	B: Executory Contracts and Unexp s are leases that are still in effect; es not assume it. 11 U.S.C. § 365(p	the lease period h	
Describe your un	expired personal prop	nerty leases			Will the lease I	he assumed?
_	empirou porociiai prop					- J uodumou i
Lessor's name: Description of leas	ed				□ No	
Property:					☐ Yes	
Lessor's name:	- 4				□ No	
Description of leas Property:	ea				☐ Yes	

Debtor 1 Nicholas Philip Lugo	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes

Par	t 3: Sign Below	
	ler penalty of perjury, I declare that I have indicate perty that is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal
Χ	/s/ Nicholas Philip Lugo	X
	Nicholas Philip Lugo Signature of Debtor 1	Signature of Debtor 2
	Date Sentember 21 2023	Date

Case number (if known)

Fill in this information to identify your case:	Charles and how only and directed in this forms and in Forms
	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1 Nicholas Philip Lugo	
Debtor 2 (Spouse, if filing)	■ 1. There is no presumption of abuse
United States Bankruptcy Court for the: Eastern District of North Carolina	☐ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test</i>
Case number	Calculation (Official Form 122A-2).
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	
Chapter 7 Statement of Your Current Month	Iv Income 12/19
Be as complete and accurate as possible. If two married people are filing together, both attach a separate sheet to this form. Include the line number to which the additional inficase number (if known). If you believe that you are exempted from a presumption of ab qualifying military service, complete and file Statement of Exemption from Presumption Part 1: Calculate Your Current Monthly Income	formation applies. On the top of any additional pages, write your name and buse because you do not have primarily consumer debts or because of
1. What is your marital and filing status? Check one only.	
■ Not married. Fill out Column A, lines 2-11.	
☐ Married and your spouse is filing with you. Fill out both Columns A an	nd B, lines 2-11.
\square Married and your spouse is NOT filing with you. You and your spous	se are:
\square Living in the same household and are not legally separated. Fill ou	ut both Columns A and B, lines 2-11.
☐ Living separately or are legally separated. Fill out Column A, lines 2 penalty of perjury that you and your spouse are legally separated under living apart for reasons that do not include evading the Means Test rec	ler nonbankruptcy law that applies or that you and your spouse are
Fill in the average monthly income that you received from all sources, derived durin 101(10A). For example, if you are filing on September 15, the 6-month period would be Mithe 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. D spouses own the same rental property, put the income from that property in one column or	larch 1 through August 31. If the amount of your monthly income varied during to not include any income amount more than once. For example, if both
	Column A Debtor 1 Debtor 2 or non-filing spouse
 Your gross wages, salary, tips, bonuses, overtime, and commissions (be payroll deductions). 	before all \$ 1,311.91 \$
 Alimony and maintenance payments. Do not include payments from a spo Column B is filled in. 	ouse if \$ 0.00 \$
4. All amounts from any source which are regularly paid for household ex of you or your dependents, including child support. Include regular contributions an unmarried partner, members of your household, your dependents, p and roommates. Include regular contributions from a spouse only if Column filled in. Do not include payments you listed on line 3.	tributions parents,
5. Net income from operating a business, profession, or farm	
Debtor 1	
Gross receipts (before all deductions) \$\frac{0.00}{0.00}\$	
Cramary and necessary operating expenses	oy here -> \$ 0.00 \$
Net monthly income from a business, profession, or farm \$Cop 6. Net income from rental and other real property	,, note > 4
Debtor 1	
Gross receipts (before all deductions) \$ 0.00	
Ordinary and necessary operating expenses -\$ 0.00	
Net monthly income from rental or other real property \$ 0.00 Cop	oy here -> \$ \$
7. Interest, dividends, and royalties	\$ 0.00 \$

ebtor 1	Nicholas Philip Lugo			Case	e number (i	f known)			
				Colu. Debt	ımn A tor 1		Column Debtor non-fili		se
8. Un	employment compensation			\$		0.00	\$		
the	not enter the amount if you contend that the amoun Social Security Act. Instead, list it here:		ınder						
	For you \$ For your spouse \$	0.00	-						
9. Per ber not Un dis pay doe if re	nsion or retirement income. Do not include any armefit under the Social Security Act. Also, except as so include any compensation, pension, pay, annuity, of ited States Government in connection with a disability, or death of a member of the uniformed service paid under chapter 61 of title 10, then include that also not exceed the amount of retired pay to which you stired under any provision of title 10 other than chap	mount received that was a stated in the next sentence or allowance paid by the ity, combat-related injury oces. If you received any repay only to the extent that u would otherwise be entit ter 61 of that title.	e, do or tired t it tled	\$		0.00	\$		
Do rec dor Un dis	ome from all other sources not listed above. Sp not include any benefits received under the Social seived as a victim of a war crime, a crime against hu mestic terrorism; or compensation pension, pay, an ited States Government in connection with a disability, or death of a member of the uniformed servicurces on a separate page and put the total below	Security Act; payments manity, or international or nuity, or allowance paid by ity, combat-related injury o	y the						
	Contributions from Family		-	\$	2,80	00.00	\$		
	Total and out from a second a second if and		-	\$		0.00	\$ \$		
	Total amounts from separate pages, if any.		+	\$		0.00	Ф		
	Iculate your total current monthly income. Add linch column. Then add the total for Column A to the to			4,111	.91	+ \$ _		_ = \$	4,111.91
Part 2:	Determine Whether the Means Test Applies	to You						in	come
	Iculate your current monthly income for the year a. Copy your total current monthly income from line	•			Copy	line 11 l	nere=>	\$_	4,111.91
	Multiply by 12 (the number of months in a year)								x 12
12b	o. The result is your annual income for this part of the	e form						12b. \$_	49,342.92
13. Ca	culate the median family income that applies to	you. Follow these steps:							
Fill	in the state in which you live.	NC							
Fill	in the number of people in your household.	1							
Fill To	in the median family income for your state and size find a list of applicable median income amounts, go this form. This list may also be available at the bank	of household. online using the link spec						13. \$_	60,072.00
	w do the lines compare?	. ,							
148	a. Line 12b is less than or equal to line 13. C		k box	1, <i>The</i>	ere is no	presum	nption of a	abuse.	
14	•		he pre	esump	otion of a	buse is	determine	ed by Forr	m 122A-2.
art 3:	Go to Part 3 and fill out Form 122A–2. Sign Below								
air-07	By signing here, I declare under penalty of perjury	that the information on th	nis sta	atemer	nt and in	any atta	achments	is true an	nd correct.
						,			
	X /s/ Nicholas Philip Lugo Nicholas Philip Lugo								
	Signature of Debtor 1								

Debtor 1	Nicholas Philip Lugo	Case number (if known)	
Dat	September 21, 2023 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of North Carolina

In re	Nicholas Philip Lugo		Case N		
		Debtor(s)	Chapter	7	_
	DISCLOSURE OF CO	OMPENSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	tursuant to 11 U .S.C. § 329(a) and Fed. Bankr ompensation paid to me within one year before e rendered on behalf of the debtor(s) in conten	e the filing of the petition in bankrupto	y, or agreed to be pa	id to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	1,400.00	
	Prior to the filing of this statement I have r			1,400.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was	:			
	☐ Debtor ☐ Other (specify):	Elaine Marie Lugo			
3. T	The source of compensation to be paid to me is	:			
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclos	sed compensation with any other perso	on unless they are me	embers and associates of my law firm	n.
[☐ I have agreed to share the above-disclosed copy of the agreement, together with a list of				
5. I	n return for the above-disclosed fee, I have ag	reed to render legal service for all aspe	ects of the bankruptc	y case, including:	
b c	 Analysis of the debtor's financial situation, a Preparation and filing of any petition, sched Representation of the debtor at the meeting [Other provisions as needed] 	ules, statement of affairs and plan whi	ch may be required;		
6. B	by agreement with the debtor(s), the above-disc Representation of the Debtor(s) discharge of a particular debt of tax advise, or credit repair.	in any action or proceeding obje	cting to the Debt		
		CERTIFICATION			
	certify that the foregoing is a complete statem unkruptcy proceeding.	ent of any agreement or arrangement f	or payment to me for	r representation of the debtor(s) in	
Se	eptember 21, 2023	/s/ William G. B			
Do		William G. Berg	gren 18675		
		Signature of Attor Berggren Law (ney Offices BLIC		
		P.O. Box 18306			
		Raleigh, NC 276	619		
			Fax: (919) 875-08	382	
		wgb@raleighba Name of law firm	inkruptcy.com		
		Traine of taw firm			_

United States Bankruptcy Court Eastern District of North Carolina

In re	Nicholas Philip Lugo		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR I	MATRIX	
Γhe ab	ove-named Debtor hereby verifies th	hat the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	September 21, 2023	/s/ Nicholas Philip Lugo		
		Nicholas Philip Lugo		
		Signature of Debtor		

Cape Fear Valley Health PO Box 788 Fayetteville, NC 28302-0788 Hunter Warfield c/o Camden Apartments 4620 Woodland Corp Blvd Tampa, FL 33614

Citibank/Best Buy
Citicorp Cr Srvs/Centralized Bankruptcy
Po Box 790040
St Louis, MO 63179

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Discover PO Box 30939 Salt Lake City, UT 84130 MOHELA Attn: Bankruptcy 633 Spirit Drive Chesterfield, MO 63005

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 N.C. Dept of Revenue Office Service Div. Bankruptcy Unit PO Box 1168 Raleigh, NC 27602-1168

Elaine Marie Lugo 206 Saxony Pl. Apt. K Fayetteville, NC 28304 Pathgroup PO Box 740858 Cincinnati, OH 45274-0858

Fit 4 Life Health Clubs PO Box 80233 Raleigh, NC 27623 Peak Payment Solutions PO Box 1040 Kaysville, UT 84037

Fit4Life Health Clubs 2820 Hope Mills Rd. Fayetteville, NC 28306 Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus Mac X2303-01a 3rd Floor Des Moines, IA 50328

Freedom Road Financial Attn: Bankruptcy 10509 Professional Cir, Suite 100 Reno, NV 89521

FreedomRoad Financial PO Box 4597 Oak Brook, IL 60522-4597